

Men of Arms Assistance

PLEASE FILL OUT FORM COMPLETELY RETURN TO: REQUESTS@MENOFARMS.INFO

Date: _____

Name:		Age:	Sex:
	Work Phone:		
Email:			
PROJECT INFORMATION			
Please briefly describe your r	need.		
Please provide any additiona	l details we should know about	the work that needs	to be done.
Please describe the reasons y	/ou need assistance (financial, p	ohysical, etc.)	
Describe your financial ability	/ to help pay for this project's c	ompletion.	

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FAMILY INFORMA	ATION:				
Single	☐ Married	☐ Separ	ated	☐ Divorced	☐ Widow(er)
Spouse's Name (if	applicable):				
Spouse's Age:		Spouse's S	ex:		
Names & ages of o	other family living	with you:			
Names & ages of a	anyone else living	with you:			
HOUSING INFORM	MATION:				
Rent Ov	wn 🗌 Live	☐ No Current Housing			
EMPLOYMENT IN	FORMATION				
Are you currently	employed?	Yes 🗌 No			
If YES , where?				_ How long?	
If NO , how long ha	ave you been une	mployed?			
Is your spouse cur	rently employed?	Yes	□No		
If YES , where?				_ How long?	
If NO , how long ha	as he/she been ur	nemployed?			

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OTHER INFORMATION Who or how were you referred to M

Who or how were you referred to Men of Arms for assistance?						
Have you been assisted by Men of Arms BEFORE ?	_					
Do you regularly attend church services?						
If YES , which church do you attend and where is it located?						
How long have you attended this church?	_					
List any small group ministries you are involved with on a regular basis & the leader's name (e.g. Life group, Bible study, accountability group, etc.):						
	_					
If you are not involved with a small group, list people who know you and are a part of this church:						
	_					
Thank you for applying! 2 Corinthians 4:5 says: "We do not preach ourselves, but Jesus Christ as Lord, and ourselves as servants for Jesus' sake."						
Men of Arms operates by Serving in Jesus' Name.						
As Jesus served those in need, so do we. Men of Arms is a ministry committed to stepping into the community as a group set apart to serve others in His name.						
The help you are applying for - both the labor and its cost - is made possible through the generosity of volunteers who share a heart for supporting those unable to meet their home repair needs on their own. We strive to reflect Jesus' care and compassion for those He loves.						
Each request for assistance is carefully reviewed on an individual basis. Once we review this information, we will meet with you to discuss your needs.						
I acknowledge that I have read and understood the above, and all information is true and correct to the best of my knowledge.						
Applicant's Signature Date						

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